

# Policy and Procedure Template for Administrative Controls of Infectious Diseases

[Name of clinic, address, logo]

Date of Creation/Last revision:

**Instructions for template use:** This template is an example of a policy and procedure that can be adapted for use in a clinical office setting. Fill in the blanks provided with information specific to your clinic. You are responsible for ensuring that the information is up to date. Please review and delete items that are not relevant to your setting, and add items as needed. For more information about IPAC policies and procedures, refer to the resources below or visit the IPAC Information for Healthcare Professionals page on [halton.ca](http://halton.ca).

## Purpose:

The following measures shall be put in place to reduce the risk of infection to staff and patients.

Written office/clinic policies and procedures for administrative controls shall be followed at all times.

This policy shall be reviewed and updated regularly and as needed.

## Healthy workplace:

1. Staff shall remain at home when experiencing signs and symptoms of infectious disease, including but not limited to: fever, sore throat, runny nose, cough, vomiting/diarrhea, rash and/or conjunctivitis.

## Immunizations:

1. It is recommended that staff maintain up to date immunizations in accordance with the Canadian Immunization Guide. This includes:
  - Annual Influenza vaccine in the autumn
  - Single dose of acellular pertussis (given as Tdap)
  - Two doses of the measles/mumps/rubella vaccine or serological evidence of immunity
  - Two doses of the varicella vaccine or serological evidence of immunity,
  - Three doses of hepatitis B vaccine with serological confirmation of immunity for staff who are at risk of exposure to blood or body fluids.
  - Booster dose of Tdap once every 10 years.
  - Complete primary series and recommended boosters of the COVID-19 vaccine
2. Staff shall ensure they have a record of HBV immunity obtained through serology testing in the event of an exposure event.
3. Healthcare providers performing exposure-prone procedures will be tested for blood-borne pathogens (HBV, HCV, and HIV) annually, or in accordance with their regulatory college requirements.

## Prevention of needle-stick injuries

1. Sharps shall be disposed of in a specific sharps container at the point-of-care immediately after use. Containers will be clearly labelled, puncture-resistant, tamper-proof, leak-proof and not overfilled.

2. Only safety-engineered medical sharps will be used.

### **Response to significant exposure to blood and body fluids**

1. The following protocol shall be implemented in the event of a significant exposure to blood or body fluids, such as a needle-stick injury.
  - Provide immediate first aid, including flushing/ gently washing the wound with soap and water as appropriate based on the location.
  - Obtain consent from the source person to test for blood-borne infections and document the consent process.
  - Perform serology testing for HBV, HCV and HIV at baseline and follow-up for the exposed person, in consultation with an Infectious Disease specialist or public health.
  - Document the date and time of the incident, what the worker was doing, the protective measures that were implemented, and actions taken. Report to the Workplace Safety Insurance Board.
  - Present to the nearest emergency room for HIV prophylaxis within one to two hours of exposure or HBV prophylaxis, if indicated.

### **Training**

1. Staff shall receive training in this policy and procedure during orientation and at regular intervals or as needed, and training shall be documented.

Continuing education \_\_\_\_\_ (course name, frequency)

### **References:**

1. Ontario Agency for Health Protection and Promotion (Public Health Ontario), Provincial Infectious Diseases Advisory Committee. Infection Prevention and Control for Clinical Office Practice. 1st Revision. Toronto, ON: Queen's Printer for Ontario; April 2015.
2. Ontario Agency for Health Protection and Promotion (Public Health Ontario). IPAC Checklist for Clinical Office Practice: Reprocessing of Medical Devices. [https://www.publichealthontario.ca/-/media/documents/c/2019/checklist-clinical-office-reprocessing.pdf?sc\\_lang=en](https://www.publichealthontario.ca/-/media/documents/c/2019/checklist-clinical-office-reprocessing.pdf?sc_lang=en)
3. Public Health Agency of Canada. Canadian Immunization Guide: Part 3 –Vaccination of Specific Populations Immunization of workers. <https://www.canada.ca/en/public-health/services/publications/healthy-living/canadian-immunization-guide-part-3-vaccination-specific-populations/page-11-immunization-workers.html>